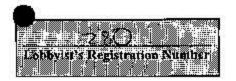
LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.



FOR OFFICE USE ONLY

Postmark Date: 4/24/98 LSL&P

1981052

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 fee to Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge LA 70809-7017, (504) 922-1400.
- This form must be submitted within 5 days of any changes in your registration form to add employers or those you represent or if you cease all activities

requiring registration. It must be submitted within 10 days of any terminations of employment or representations. Complete employer verification form(s) must be submitted for each additional representation.	11 pr
1. NAME womach, Randall W. Last First MI 2. BUSINESS PHONE (504) 344-0381	145216 () \$10.00 ()
3. BUSINESS ADDRESS 307 France Street Baton Rouge, La Street and No. City State 4. EMPLOYER Harris, Deville & Associates, Inc.	70802 Zlp
EMPLOYER'S ADDRESS same as above Street and No. City St. 6. Have you crased or terminated all lobbying activities requiring registration? Yes	No X
7. LIST HELOW (a) Names of persons, groups, or organizations which you are adding or a person, group, or organization listed; (c) the type of business each is engaged in or the group; (d) whether or not the ellent or someone else pays you to lobby; and (c) the date 24:53(C) REQUIRES THAT A VERIFICATION FORM BE SIGNED BY EACH PER EMPLOYS YOU. THOSE FORMS MUST MATCH THE NAMES ADDED BELOW. Name Koch Oil Company (and attached list of such as the company). 	purpose or function of the organization of coffermination if applicable, R.S. SON YOU REPRESENT OR WHO
Address 4332 Emory Ave. Bafon Rouge, W	4 70808
Business or purpose Various	
New Representation Does this person pay you? Yes	
If No, who pays you?	Postupa 1988 Av
Terminated Representation as ofHAN!	D DELIVERED

* SUPPLEMENTAL REGISTRATION FORM



2.	. Name	
	Address	
	Business or purpose	
	New Representation Does this person pay you?	
	If No, who pays you?	
	Terminated Representation as of	
3.	Name	
	Address	
	Business or purpose	
	New Representation Does this person pay you?	
	If No, who pays you?	
	Terminated Representation as of	
Pa	rish of East Baton Rauge	
Be	force me, the undersigned authority, personally came and appeared Randell Ubase of who,	
	ter being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.	
Sw	Signature of Lobbyist vorm to and subscribed before me on this ### day of April 1998. Notary Public	